

Site identification
 Property Owner Doug Kolek Well Number _____
 Address 2661 315th St. Hopkinton
 Tenant _____
 Well Depth 255 ft Date completed 11/20/98

Location County Delaware
 _____ mi. N and _____ mi. E of intersection of _____ and _____
 _____ mi. S and _____ mi. W
 1/4 of the _____ 1/4 of the _____ 1/4 of _____ Sec. 23 TWP 87N RNG 4 E
 Show exact location of well in section grid with a dot (•). Sketch map of well location on property.

upland hillside valley Elevation (if known) _____

Formation log

From	To	Color	Hardness	Formation description
0	35	lt Br	soft	clay
35	96	dk grey	hard	rock
96	175	grey	"	"
175	255	tan	"	"

use additional sheets as needed

Remarks (including depth of lost drilling fluids, materials, or tools)

Well use

<input checked="" type="checkbox"/> Domestic	<input type="checkbox"/> Municipal	<input type="checkbox"/> Commercial
<input type="checkbox"/> Livestock	<input type="checkbox"/> Public supply	<input type="checkbox"/> Monitoring
<input type="checkbox"/> Test well	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Other _____ (explain)

Drill method rotary auger cable other _____
Hole size
10 inch from 0 ft to 35 ft hole size continued
6 inch from 100 ft to 255 ft
8 inch from 35 ft to 100 ft _____ inch from _____ ft to _____ ft

Record all depth measurements from ground level (GL). Use (+) for above GL measurements.

Casing Drive shoe (yes/no) _____ Pitless adapter (yes/no) _____

Size (OD)	Type / Wt	Depth top	Depth bottom	Amount (length)
6	SDR21	+1	100	101
4 1/2	SE-140	95	255	160

Perforated or slotted casing? (yes/no) _____
 Perforated / slotted from 215 ft to 255 ft
 Perforated / slotted from _____ ft to _____ ft

Casing grouted? (yes/no) _____ Placement method _____

Type	Depth Top	Depth bottom	Amount (vol/wt)
Bentonite	0	100	33%

Well screen? (yes/no) _____

Diameter	Slot size	Depth Top	Depth Bottom	Length	Material
0	_____				
0	_____				

Bottom capped (yes/no) _____ with _____
 Seals / Packers (yes/no) _____ kind _____ depth _____ ft
 Gravel packed (yes/no) _____ from _____ ft to _____ ft
 type _____ amount _____

Well developed? (yes/no) _____
 Explain With Air
 (pumped, airlifted, bailed) for 1 hrs at 10 GPM.

Pump installed? (yes/no) _____ Date ____/____/____
 Installer's name _____
 Type of pump _____ Depth to intake _____ ft
 Pump diameter _____ Rated capacity _____ GPM

Water information Aquifer: sand / gravel limestone sandstone
 Main water-supply zone from 215 ft to 255 ft seepage well
 Static water level 165 ft (below/above) GL; tape airline E-line estimate
 Pumping water level 220 ft below GL; tape airline E-line estimate
 At yield of 10 GPM; orifice volumetric estimate
 Measurements taken at _____: _____ (AM/PM) Date ____/____/____

Water quality test? (yes/no) _____ Date tested ____/____/____
 Tested by _____

Contractor Gingerich Well
 Address 1321 Locust Ave Kalona IA 52247
 Driller Conan Gingerich Certification no. 40103